



Departmental Quarterly Performance Report

OFFICE OF FAIR EMPLOYMENT PRACTICES

**FY 04-05
Quarter 3**

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Department Name: OFEP

Reporting Period: Q3 04-05

MAJOR PERFORMANCE INITIATIVES

Describe Key Initiatives and Status

Check all that apply

<p>Implementation of County-wide Case Tracking System.</p> <ol style="list-style-type: none"> 1. Trained departmental personnel on use of system. 2. Began pilot of system in Aviation, Fire Rescue, Water & Sewer, and Planning and Zoning. 	<p><input type="checkbox"/> Strategic Plan <input checked="" type="checkbox"/> Business Plan <input type="checkbox"/> Budgeted Priorities <input type="checkbox"/> Customer Service <input type="checkbox"/> ECC Project <input type="checkbox"/> Workforce Dev. <input type="checkbox"/> Audit Response <input type="checkbox"/> Other _____ (Describe)</p>
<p>Develop training opportunities that provide employees and managers with the competencies that result in increased proficiencies, including a Countywide training approach.</p> <ol style="list-style-type: none"> 1. Personnel Division heads and Affirmative Action Officers were trained on the standards for conducting an internal investigation. 2. Use feedback to gear additional training topics. 	<p><input checked="" type="checkbox"/> Strategic Plan <input checked="" type="checkbox"/> Business Plan <input type="checkbox"/> Budgeted Priorities <input type="checkbox"/> Customer Service <input type="checkbox"/> ECC Project <input type="checkbox"/> Workforce Dev. <input type="checkbox"/> Audit Response <input type="checkbox"/> Other _____ (Describe)</p>
<p>Enforce local, state, and federal discrimination and anti-harassment legislation.</p> <ol style="list-style-type: none"> 1. Enforced discrimination and anti-harassment laws through investigatory process in various departments. 2. Enforced anti-bias policies in the workplace by investigating and implementing corrective action in hostile working environment complaints. 	<p><input checked="" type="checkbox"/> Strategic Plan <input checked="" type="checkbox"/> Business Plan <input type="checkbox"/> Budgeted Priorities <input type="checkbox"/> Customer Service <input type="checkbox"/> ECC Project <input type="checkbox"/> Workforce Dev. <input type="checkbox"/> Audit Response <input type="checkbox"/> Other _____ (Describe)</p>
<p>Work with local educational institutions, community groups, etc. to maximize diversity of applicant pools.</p> <ol style="list-style-type: none"> 1. Deliver guest speeches on behalf of county to local groups. 2. Served on various committees aimed at increasing minority applicant pool for specific job classifications. 3. Assisted with reasonable accommodations and job placements assistance for Florida Division of Blind Services and Miami-Dade County. 	<p><input checked="" type="checkbox"/> Strategic Plan <input type="checkbox"/> Business Plan <input type="checkbox"/> Budgeted Priorities <input type="checkbox"/> Customer Service <input type="checkbox"/> ECC Project <input type="checkbox"/> Workforce Dev. <input type="checkbox"/> Audit Response <input type="checkbox"/> Other _____ (Describe)</p>

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<p>Monitoring/reporting to ensure compliance (fair employment practices). County workforce utilization of all race/ethnic groups in relationship to Miami-Dade County labor market statistics.</p> <p>1. Produce quarterly report on workforce utilization for departmental review.</p>	<p><input checked="" type="checkbox"/> Strategic Plan <input checked="" type="checkbox"/> Business Plan <input type="checkbox"/> Budgeted Priorities <input type="checkbox"/> Customer Service <input type="checkbox"/> ECC Project <input type="checkbox"/> Workforce Dev. <input type="checkbox"/> Audit Response <input type="checkbox"/> Other _____ (Describe)</p>
<p>Develop systematic approach to improving employee satisfaction including, monitoring across diverse groups and classifications, and developing corrective action plans for improving the work environment and employee support climate.</p> <p>1. Used utilization analysis and complaints registered to develop pro-active corrective action plans for various departments.</p>	<p><input type="checkbox"/> Strategic Plan <input type="checkbox"/> Business Plan <input type="checkbox"/> Budgeted Priorities <input checked="" type="checkbox"/> Customer Service <input type="checkbox"/> Workforce Dev. <input type="checkbox"/> ECC Project <input type="checkbox"/> Audit Response <input type="checkbox"/> Other _____ (Describe)</p>
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PERSONNEL SUMMARY

A. Filled/Vacancy Report

NUMBER OF FULL-TIME POSITIONS*	Filled as of September 30 of Prior Year	Current Year Budget	Actual Number of Filled and Vacant positions at the end of each quarter							
			Quarter 1		Quarter 2		Quarter 3		Quarter 4	
			Filled	Vacant	Filled	Vacant	Filled	Vacant	Filled	Vacant
			5	3	6	2	7	1		

* Public Safety Departments should report the sworn versus non-sworn personnel separately and Departments with significant part-time, temporary or seasonal help should report these separately.

Notes:

B. Key Vacancies

OFEP is in the process of re-classifying its vacant FEP Training Specialist position.

C. Turnover Issues

N/A

D. Skill/Hiring Issues

N/A

E. Part-time, Temporary and Seasonal Personnel

OFEP does not employ any individuals under this category.

F. Other Issues

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FINANCIAL SUMMARY

(All Dollars in Thousands)

	PRIOR YEAR Actual	CURRENT FISCAL YEAR						
		04-05 Total Annual Budget	Quarter 3		Year-to-date			
			Budget	Actual	Budget	Actual	\$ Variance	% of Annual Budget
Revenues General Funds			\$183,000	\$173,000	\$732,000	\$506,000	0	69.13%
Total	\$542,000	\$732,000	\$183,000	\$173,000	\$732,000	\$506,000	0	
Expense*								
Personnel	\$533,000	\$673,000	\$168,000	\$168,000	\$505,000	\$427,000	\$78,000	
Operating	\$9,000	\$59,000	\$15,000	\$5,000	\$45,000	\$82,000	-\$37,000	
Capital								
Total	\$542,000	\$732,000	\$183,000	\$173,000	\$550,000	\$509,000	\$41,000	69.54%

* Expenditures may be reported by activity as contained in your budget or may be reported by category (personnel, operating and capital).

Equity in pooled cash (for proprietary funds only)

Fund/ Subfund	Prior Year	Projected at Year-end as of			
		Quarter 1	Quarter 2	Quarter 3	Quarter 4
Total					

Comments:

(Explain variances, discuss significant in-kind services, provide status of aged receivables at 30-60-90-+ days and those scheduled for write-off, if applicable)

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STATEMENT OF PROJECTION AND OUTLOOK

The Department projects to be within authorized budgeted expenditures and projects that available revenues will exceed expenses except as noted below:

Notes and Issues:

(Summarize any concern or exception which will prohibit the Department from being within authorized budgeted expenditures and available revenues)

DEPARTMENT DIRECTOR REVIEW

The Department Director has reviewed this report in its entirety and agrees with all information presented including the statement of projection and outlook.

Signature

Department Director

Date_____